

Practitioner's Docket No. 6734-8

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Meyers, W.

Application No.: 09/679,970

Group No.: 3625

Filed: 10/05/2000

Examiner: Sugarman, S.

For: Method of manufacture of contact lens to treat vision

**RESPONSE UNDER
37 C.F.R. § 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP
3625**

Box AF
Commissioner for Patents
Washington, D.C. 20231

AMENDMENT OR RESPONSE AFTER FINAL REJECTION--TRANSMITTAL

1. Transmitted herewith is an amendment after final rejection (37 C.F.R. 1.116) for this application.

STATUS

2. Applicant is a small entity. A statement was already filed.

CERTIFICATION UNDER 37 C.F.R. §§ 1.8(a) and 1.10*

*(When using Express Mail, the Express Mail label number is mandatory;
Express Mail certification is optional.)*

I hereby certify that, on the date shown below, this correspondence is being:

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37 C.F.R. § 1.8(a)

37 C.F.R. § 1.10*

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TRANSMISSION

X facsimile transmitted to the Patent and Trademark Office. (703) 872 - 9319


Signature

Michelle E. Hujar

(type or print name of person certifying)

Date: December 3, 2003

* Only the date of filing (§ 1.6) will be the data used in a patent term adjustment calculation, although the date on any certificate of mailing or transmission under § 1.8 continues to be taken into account in determining timeliness. See § 1.703(f). Consider "Express Mail Post Office to Addressee" (§ 1.10) or facsimile transmission (§ 1.6(d)) for the reply to be accorded the earliest possible filing date for patent term adjustment calculations.

EXTENSION OF TERM

3. Please charge account 15-0450 for the extension required.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

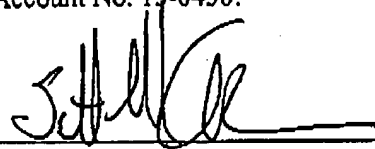
	(Col. 1)		(Col. 2)	(Col. 3)	SMALL ENTITY	
	Claims Remaining After Amendment		Highest No Previously Paid For	Present Extra	Rate	Addit Fec
Total	17	Minus	20	= 0	x \$9 =	\$0
Indep	3	Minus	3	= 0	x \$40 =	\$0
First Presentation of Multiple Dependent Claim					+ \$135 =	\$0
Total Addit. Fee						\$0

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
 ** If the "Highest No. Previously Paid For" IN THIS SPACE (Column 2, Row 1) is less than 20, enter "20".
 *** If the "Highest No. Previously Paid For" IN THIS SPACE (Column 2, Row 2) is less than 3, enter "3".
 The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

No additional fee for claims is required.

FEE DEFICIENCY

5. If any additional extension and/or fee is required, charge Account No. 15-0450.
 If any additional fee for claims is required, charge Account No. 15-0450.



Signature of Practitioner

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S/N: 09/679,970
December 3, 2003
-1-

IN THE UNITED STATES PATENT & TRADEMARK OFFICE

Applicant	<i>Meyers, W.</i>	Examiner	<i>Sugarman, S.</i>
S/N	<i>09/679,970</i>	Art Unit	<i>3625</i>
Filed	<i>10/05/2000</i>	Date	<i>December 3, 2003</i>
For	<i>Method of Manufacture of Contact Lens to Treat Vision</i>		

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AMENDMENT AFTER FINAL

Dear Sir:

In response to the Office Action of June 3, 2003 the following amendments and remarks are made relative thereto, and reconsideration by the Examiner is respectfully requested.

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.